

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SO	753/6	6/27/00
O.I.P.E. CLASSIFIER	PH		6/31
FORMALITY REVIEW	HA	858	08-14-00
RESPONSE FORMALITY REVIEW	CH	8583	03/12/01

INDEX OF CLAIMS

✓ Rejected N Non-elected
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Form PTO-438
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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